

<b>CLAIMS ONLY</b>							SERIAL NO. <div style="font-family: cursive;">09973351</div>	FILING DATE	
							APPLICANT(S)		
<b>CLAIMS</b>									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1	/						51		
2		/					52		
3		/					53		
4		/					54		
5		/					55		
6		/					56		
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42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	2	↓		↓		↓	TOTAL IND.		↓
TOTAL DEP.	1	←		←		←	TOTAL DEP.		←
TOTAL CLAIMS	2						TOTAL CLAIMS		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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